

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000023

FILED
Apr 29, 2008
Secretary of State

Entity Name: KINGDOM OF GOD WORSHIP & HEALING CENTER, INC.

Current Principal Place of Business:

11349 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

PO BOX 770697
ORLANDO, FL 328770697

New Mailing Address:

FEI Number: 20-8141549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIMENEZ, KEVIN E
11878 SINDLESHAM CT
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GIMENEZ, KEVIN E
Address: 11349 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837

Title: DV () Delete
Name: GIMENEZ, KEVIN
Address: 3927 TOWNSHIP SQUARE BLVD
City-St-Zip: ORLANDO, FL 32837

Title: DS () Delete
Name: GONZALEZ, EVELYN
Address: 533 MOONGLOW BLVD
City-St-Zip: ORLANDO, FL 32839

Title: DT () Delete
Name: FERRERAS, DANIEL
Address: 3948 GARDEN PLAZA WAY
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: GUSTAVO, FERERAS
Address: 2446 MILLRUN BLVD
City-St-Zip: KISSIMMEE, FL 34744

Title: D () Delete
Name: LEE, GREGORY
Address: 1513 COLONY AVE
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: GIMENEZ, KEVIN
Address: 1763 BOGGY OAK LN
City-St-Zip: ORLANDO, FL 32824

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: B (X) Change () Addition
Name: NAZARIO, ABIEL
Address: 1763 BOGGY OAK LN
City-St-Zip: ORLANDO, FL 32824

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RIVERA, DANIEL
Address: 5832 GUENEVERE COURT
City-St-Zip: ST. CLOUD, FL 34772

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN E GIMENEZ

DP

04/29/2008

Electronic Signature of Signing Officer or Director

Date